FORM D OMB Number:..... 3235-0076 UNITED STATES Expires:..... September 15, 2008 Wall Processis Ecurities and exchange commission Estimated average burden Washington, D.C. 20549 hours per form16.00 FORM D BUUS O E NUL SEC USE ONLY NOTICE OF SALE OF SECURITIES PROCESSED PROCESSED Serial SECTION 4(6), AND/OR Washington, DUNIFORM LIMITED OFFERING EXEMPTIONUL 0 3 2008-**DATE RECEIVED** Name of Offering (check if this is an amendment and name has changed, and indicate change.) **Limited Liability Company Interests** Filing Under (Check box(es) that apply): □ Rule 504 □ Rule 505 □ Rule 506 Section 4(6) □ ULOE Type of Filing: ☐ New Filing A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer Name of Issuer check if this is an amendment and name has changed, and indicate change. Haidar Neptune Fund LLC Address of Executive Offices (Number and Street, City, State, Zip Code) Telep c/o Haidar Capital Management, 152 East 57th Street, 7th Floor, New York, NY 10019 (212) 752-5147 Address of Principal Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) **Brief Description of Business:** Investment Vehicle Type of Business Organization

GENERAL INSTRUCTIONS

corporation

☐ business trust

Actual or Estimated Date of Incorporation or Organization:

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

limited partnership, already formed

☐ limited partnership, to be formed

Month

1

□ Actual

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Ε

☐ Estimated

Year

3

0

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State;

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA										
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Managing Member					
Full Name (Last name first, it	f individual):	Haidar Capital Manag	gement LLC							
Business or Residence Address (Number and Street, City, State, Zip Code): 152 East 57 th Street, 7 th Floor, New York, NY 10019										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	Administrative Member					
Full Name (Last name first, it	f individual):	Haidar Capital Advis	ors LLC							
Business or Residence Address (Number and Street, City, State, Zip Code): 152 East 57 th Street, 7 th Floor, New York, NY 10019										
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	Principal of Managing Member and Administrative Member					
Full Name (Last name first, i	f individual):	Haidar, Said N.			:					
Business or Residence Address (Number and Street, City, State, Zip Code): 152 East 57 th Street, 7 th Floor, New York, NY 10019										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	de):							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Addr	ess (Number and	Street, City, State, Zip Coo	le):							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Address (Number and Street, City, State, Zip Code):										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Address (Number and Street, City, State, Zip Code):										
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					
Full Name (Last name first, i	f individual):									
Business or Residence Address (Number and Street, City, State, Zip Code):										
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner					

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

, B. INFORMATION ABOUT OFFERING														
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?														
2.	A400 0001									00,000*				
3.	Does the	offe	ring permit	joint owne	ership of a	single uni	t?						⊠ Yes	: □ No
Full N	lame (La	st na	me first, if	individual) N/A	ı								
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
	Check "/	All St	ates" or ch	neck indivi	dual State:	tends to So								☐ All States
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Full 1	lame (La	st na	me first, if	individual)									
Buşir	ess or R	eside	ence Addre	ess (Numb	er and Str	eet, City, S	State, Zip	Code)						
Nam	of Asso	ciate	d Broker o	or Dealer										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
	`	AK]	_			☐ [CO]					□ [GA]	☐ [HI]	□ [ID]	
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Full Name (Last name first, if individual)														
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
		AK]	[AZ]	☐ [AR]	CA]	□ [CO]		□ [DE]		[FL]	☐ [GA]	[HI]	[ID]	
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O (F	ii) 🗆 (SC]	CSD]	□ [TN]	[ТХ]			□ [VA]	[WA]		□ [WI]		[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

May be waived.

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
Type of Security		Aggregate Offering Price		Amount Already Sold
Debt	<u>\$</u>	0	<u>\$</u>	0
Equity	\$	0	<u>\$</u>	0
☐ Common ☐ Preferred				
Convertible Securities (including warrants)	\$	0	<u>\$</u>	0
Partnership Interests	\$	0	<u>\$</u>	0
Other (Specify) Limited Liability Company Interests)	<u>\$</u>	200,000,000	<u>\$</u>	11,035,953
Total	\$	200,000,000	\$	11,035,953
Answer also in Appendix, Column 3, if filing under ULOE				
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		Number Investors		Aggregate Dollar Amount of Purchases
Accredited Investors		. 6	<u>\$</u>	11,035,953
Non-accredited Investors		0	<u>\$</u>	0
Total (for filings under Rule 504 only)		0	<u>\$</u>	0
Answer also in Appendix, Column 4, if filing under ULOE				
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
Type of Offering		Types of Security		Dollar Amount Sold
		•	¢	N/A
			- <u>*</u>	N/A
·	_		. <u>*</u> .	
Rule 504		N/A	. \$	N/A
Total		N/A	<u> </u>	0.00
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
Transfer Agent's Fees		🗆	<u>\$</u>	0
Printing and Engraving Costs		🛛	\$	2,500
Legal Fees		🛛	\$	35,000
Accounting Fees		🖾	\$	7,500
Engineering Fees			\$	0
Sales Commissions (specify finders' fees separately)			\$	0
			\$	5,000
			<u>\$</u>	50,000
	sold. Enter '0' if answer is 'none' or 'zero.' If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Debt	sold. Enter "O" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Debt	sold. Enter 'O' if answer is 'none' or 'zero'. If the transaction is an exchange offering, check this box and indicates in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Common	sold. Enter to if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicates in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Debt

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4	b. Enter the difference between the aggregate offering production 1 and total expenses furnished in response to Par "adjusted gross proceeds to the issuer."	t C–Question 4.a. This differer	nce is the			<u>\$</u>		199,950,000
5	Indicate below the amount of the adjusted gross proceeds to used for each of the purposes shown. If the amount for any estimate and check the box to the left of the estimate. The the adjusted gross proceeds to the issuer set forth in response	purpose is not known, furnish total of the payments listed mu	an st equal	Payments Officers, Directors Affiliates	&		ſ	Payments to Others
	Salaries and fees			\$	0		\$	0
	Purchase of real estate			\$	0		\$	0
	Purchase, rental or leasing and installation of machi-			\$	0		\$	0
	Construction or leasing of plant buildings and facilitie			\$	0		\$	0
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets pursuant to a merger	s or securities of another issue		\$	0		<u>\$</u>	00
	Repayment of indebtedness			<u>\$</u>	0		\$	0
	Working capital			\$	0	⊠	\$	199,950,000
	Other (specify):			\$	0		\$	0
				<u>\$</u>	0		\$	0
	Column Totals			\$	0.00		\$	199,950,000
Total payments Listed (column totals added)				⊠ <u>\$</u>		199,950,000		
	C). FEDERAL SIGNATUR	RE					
co	nis issuer has duly caused this notice to be signed by the undonstitutes an undertaking by the issuer to furnish to the U.S. So the issuer to any non-accredited investor pursuant to paragra	Securities and Exchange Comm	n. If this no ission, upo	otice is filed unde n written request	r Rule t of its s	505, the	follow inform	ring signature nation furnished
lss	suer (Print or Type)	Signature	, ~,		Da	ite:		
	aidar Neptune Fund LLC.		Landa			U re	ne	16, 2008
		Fitle of Signer (Print or Type) Prinicipal of Managing Memb	or and Ade	ninistrativa Mar	nhor			
₽a	aid N. Haidar P	BA DITE IS	mmstrative Mer	IIDUI				

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)